



State of New Hampshire

2015 ANNUAL REPORT

The following information shall be given as of January 1
preceeding the due date Pursuant to RSA 304-C:80.

REPORT DUE BY April 1, 2015

ANNUAL REPORTS RECEIVED AFTER THE DUE DATE
WILL BE ASSESSED A LATE FEE.

Filed
Date Filed: 09/11/2015
Business ID: 709315
William M. Gardner
Secretary of State

Premier Conderge, LLC

8 Orchard Hill Circle

Bedford, NH 03110

ADDRESS OF PRINCIPAL OFFICE:

8 Orchard Hill Circle

Bedford, NH 03110

REGISTERED AGENT AND OFFICE:

Leclerc, Duane R

8 Orchard Hill Circle

Bedford, NH 03110

ENTITY TYPE: LLC
BUSINESS ID: 709315
STATE OF DOMICILE: NEW HAMPSHIRE

Property and service managment

If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information.



1 HARDY RD # 174 BEDFORD, NH 03110

PO Box is acceptable.

MANAGERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

LIST AT LEAST ONE MANAGER BELOW OR MEMBER ON RIGHT

NAME PARKER, LECLERC
STREET 8 ORCHARD HILL CIR.
CITY/STATE/ZIP BEDFORD, NH 03110
NAME CHRISTINE LECLERC
STREET 8 ORCHARD HILL CIR.
CITY/STATE/ZIP BEDFORD, NH 03110
NAME
STREET
CITY/STATE/ZIP
NAME DUANE R. LECLERC
STREET 8 ORCHARD HILL CIR.
CITY/STATE/ZIP BEDFORD, NH 03110

MEMBERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

MUST LIST AT LEAST ONE MEMBER BELOW IF NO MANAGERS

NAME
STREET
CITY/STATE/ZIP
NAME
STREET
CITY/STATE/ZIP
NAME
STREET
CITY/STATE/ZIP
NAME
STREET
CITY/STATE/ZIP

NAMES AND ADDRESSES OF ADDITIONAL MANAGERS/MEMBERS ARE ATTACHED

To be signed by the manager, if no manager, must be signed by a member.
I, the undersigned, do hereby certify that the statements on this report are true to the best of my information, knowledge and belief.

Sign here:

Please print name and title of signer:

NAME

TITLE

FEE DUE: \$150.00

E-MAIL ADDRESS (OPTIONAL):

State of New Hampshire
Fee - Form LLC 8 - (LLC) 1 Page(s)

WHEN THIS FORM
PUBLIC DOCUMENT
REQUIRED INFORMATION



T1525410010

IT WILL BECOME A
PUBLIC DISCLOSURE
IT WILL BE REJECTED

MAKE CHECK PAYABLE TO SECRETARY OF STATE
RETURN COMPLETED REPORT AND PAYMENT TO:

New Hampshire Department of State, Annual Reports, 107 N. Main St., Room 204, Concord, NH 03301